HEALTH CARE FINANCING ADMINISTRATION		OMB NO. 0938-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	04-20	Minnesota
FOR: HEALTH CARE FINANCING ADMINISTRATION		
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
HEALTH CARE FINANCING ADMINISTRATION	July 1, 2004	
DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. TYPE OF PLAN MATERIAL (Check One):		
INCHARGO AT THE DATE OF THE STATE OF THE STA		W. A. CENTRALES
NEW STATE PLAN AMENDMENT TO BE CO	··	X AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		ch amenament)
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR §130(d)	7. FEDERAL BUDGET IMPACT: a. FFY '04	\$0
42 CFR §130(d)	b. FFY '05	\$0 \$0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	
0. FAGE NORDER OF THE FLAN SECTION OR ATTACHMENT:	OR ATTACHMENT (If Applicable)	
Att. 3.1-A, pp. 54s-54t		
Att. 3.1-B, pp. 53s-53t	same	(0 f - 20)
-, FF	same mmer	: 12/17/04
	h state	
	Phke hours	0 110/104
10. SUBJECT OF AMENDMENT:	30000	
Rehabilitative Services: EPSDT Rehabilitative Services in an IEP or IFS	P	
11. GOVERNOR'S REVIEW (Check One):		•
x GOVERNOR'S OFFICE REPORTED NO COMMENT	d OTHER, AS SPECIFIED:	
© COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	<b>5</b>	
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
// Mary B. Kennedy – signature //	Stephanie Schwartz	
	Minnesota Department of Human Serv	ices
	Federal Relations Unit	
	444 Lafayette Road No.	
	St. Paul, MN 55155-3852	
13. TYPED NAME:		
Mary B. Kennedy		
14. TITLE: Medicaid Director		
15. DATE SUBMITTED:		
September 24, 2004		
FOR REGIONAL OFFICE USE ONLY		
17 DATE DECEMENC	18. DATE APPROVED: /	4-4-2
17. DATE RECEIVED: September 24, 2004	12/17/04	<b>∠</b>
DI ANI ADDROUPE ON	NE COPY ATTACHED	
	20. SIGNATURE OF REGIONAL OF	FICIAL
19. EFFECTIVE DATE OF APPROVED MATERIAL:		us
21. TYPED NAME: Cheryl A. Harris	22. TITLE: Associate Regional Administrator Division of Medicaid and Children's Health	
V	Division of Medicaid and Child	ICH S FICAIH
23 REMARKS:		

STATE: MINNESOTA ATTACHMENT 3.1-A Effective: July 1, 2004 Page 54s

TN: 04-20

Approved: 9EG 3 7 2004 Supersedes: 04-08

## 13.d. Rehabilitative services. (continued)

Appropriate children's therapeutic services and supports (mental health services) must be provided by a provider certified pursuant to Item 4.b., except that school districts are not required to provide children's therapeutic services and supports that they would not otherwise provide.

Covered services must be furnished by the following personnel:

- (1) Audiologists meeting the requirements in 42 CFR Part 440.110.
- (2) Occupational therapists certified by the National Board for Certification in Occupational Therapy who maintain state licensure as occupational therapists.
- (3) Physical therapists meeting the requirements in 42 CFR Part 440.110.
- (4) Speech-language pathologists:
  - (a) meeting the requirements in 42 CFR Fart 440.110;
  - (b) who hold a masters degree in speech-language pathology; and
  - (c) who are licensed by the state as speech-language pathologists.
- (5) Mental health professionals as defined in item 6.d.A.
- (6) Mental health practitioners practicing under the supervision of mental health professionals who:
  - (a) hold a bachelor's degree in one of the behavioral sciences or related fields from an accredited college or university and have at least 2,000 hours of supervised experience in the delivery of mental health services to children;
  - (b) have at least 6,000 hours of supervised experience in the delivery of mental health services to children;
  - (c) are graduate students in one of the behavioral sciences or related fields and are formally assigned by an accredited college or university to an agency or facility for clinical training; cr

Dec. 1. 2004 4:14PM

No. 1286 P. 2/3

STATE: MINNESOTA

Effective: July 1, 2004

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ATTACHMENT 3.1-A Page 54t

## 13.d. Rehabilitative services. (continued)

(d) hold a master's or other graduate degree in one of the behavioral sciences or related fields from an accredited college or university and have less than 4,000 hours post-master's experience in the treatment of emotional disturbance.

Mental health practitioners cannot provide psychological testing or diagnostic assessments.

- (7) Mental health behavioral aides as defined in item 4.b. page 17p working under the direction of either mental health professionals or mental health practitioners under the clinical supervision of mental health professionals.
- (8) Physicians who have a current Minnesota license as a physician.
- (9) Registered nurses and licensed practical nurses who have a current Minnesota license as registered nurses or practical nurses.

STATE: MINNESOTA ATTACHMENT 3.1-B

Effective: July 1, 2004 Page 53s

TN: 04-20

Approved: ## 17 mile

Supersedes: 04-08

## 13.d. Rehabilitative services. (continued)

Appropriate children's therapeutic services and supports (mental health services) must be provided by a provider certified pursuant to Item 4.b., except that school districts are not required to provide children's therapeutic services and supports that they would not otherwise provide.

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  - (b) have at least 6,000 hours of supervised experience in the delivery of mental health services to children;
  - (c) are graduate students in one of the behavioral sciences or related fields and are formally assigned by an accredited college or university to an agency or facility for clinical training; or

No. 1286 P. 3/3

Dec. 1. 2004 4:14PM

STATE: MINNESOTA

Effective: July 1, 2004

TN: 04-20

Approved: 000 7 2004 Supersedes: 04-08 ATTACHMENT 3.1-B

Page 53t

## 13.d. Rehabilitative services. (continued)

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- (8) Physicians who have a current Minnesota license as a physician.
- (9) Registered nurses and licensed practical nurses who have a current Minnesota license as registered nurses or practical nurses.